QuickFund\$

FINAL EVALUATION REPORT: Arts Education Teacher Incentive

Annual Commission Grant period July 1 to June 30 – Final Report due no later than July 31st

Name:			
Address:City:	State: ZIP+4		⊦4 <u> </u>
Check if this is a new address? Organization:		Email:	
Phone: Fax:	<u>: </u>		
Social Security Number or EIN Number (required for pay			
Grant Amount \$:	· -	nt Number:	
Narrative evaluation of the grant (attach additional)	sheets as necessar	rv)	
Compare the actual accomplishments of the projection.			n
Explain the impact of this grant to applicant/com:			
2. Please submit copies of programs, publicity, and or publication use (attach photo credit form as needed).	•		-
Activity Title			
Where held	Date(s) of attend	dance	
3. Actual Expenses: (retain copies of receipts for fee.			
PROJECT EXPENSES	ICA Grant	Cash Match	Total
Planning Time (# of hours)	\$	\$	\$
Fees for Services and Other Expenses (attach detail	\$	\$	\$
breakdown) Travel and Subsistence	_		+
(allowed for travel beyond a 25-mile radius):			
Airfare, or Mileage (\$.375 rate)	\$	\$	\$
Rental Car (if applicable)	\$	\$	\$
Meals (not to exceed \$30 per day)	\$	\$	\$
Lodging	\$	\$	\$
Other	\$	\$	\$
Total in-kind contributions (attach detail breakdown)		\$	\$
Total Expenses	\$	\$	\$
Application Certification: "I certify that I have complication and that all of the information contained in this re	ed with the QuickFu	rect to the best of my h	have met the
Signature of Grantee		Date	
OR ICA OFFICE Program Director Review			
UCF			
ONLY Agency Approval			